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FORMal Processing

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

JAN 14 2008

FORM D

Washington, DC 106 NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
FORM LIMITED OFFERING EXEMPTS

OMB APPROVAL						
OMB Num		3235-0076				
Expires:	Apri	l 30,2008 ge burden				
Estimated	averag	ge burden				
		se 16.00				

SE(	USE ONLY
Prefix	Serial
ÐA	TE RECEIVED

	SECTION 4(0), AND/OR	DATE RESERVED
UNIFO	ORM LIMITED OFFERING EXEM	PTION
Name of Offering ( check if this is an amendassuance of Promissory Notes	dment and name has changed, and indicate change.)	
	Rule 504 Rule 505 Rule 506 Section 4(6	ULOE
Type of Filing: New Filing Amendm	ent	PROCESSED
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the iss	suer	JAN 2 5 2008
Name of Issuer ( check if this is an amendme	ent and name has changed, and indicate change.)	LHOWSON
Friendent, Inc.		FINANCIAL
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
832 Quinnipiac Avenue, New Haven, Conn	ecticut, 06513	203-676-4169
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
	ited partnership, already formed other (	please specify):
,	Month Year anization: ① 4	mated e: DE
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of s 77d(6).	ecurities in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
and Exchange Commission (SEC) on the earlier of	on 15 days after the first sale of securities in the offering f the date it is received by the SEC at the address given t ed States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Co	mmission, 450 Fifth Street, N.W., Washington, D.C. 20	0549.
Copies Required: Five (5) copies of this notice m photocopies of the manually signed copy or bear (	ust be filed with the SEC, one of which must be manual typed or printed signatures.	ly signed. Any copies not manually signed must be
	all information requested. Amendments need only report only material changes from the information previously supp	

Filing Fee: There is no federal filing fee.

not be filed with the SEC.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

– ATTENTION –

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC ID	ENTIFICATION DATA		
<ul> <li>Each beneficial ow</li> <li>Each executive of</li> </ul>	the issuer, if the issuer having the pow ficer and director o	suer has been organized ver to vote or dispose, or d	within the past five years; irect the vote or disposition f corporate general and ma		fu class of equity securities of the issuer partnership issuers; and
Check Box(cs) that Apply:	Promoter	Beneficial Owner	Executive Officer	✓ Director	General and/or Managing Partner
Full Name (Last name first, Glass, Sean	if individual)				
Business or Residence Addre c/o Friendent, Inc., 832 (					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Larcher, Johannes	if indívídual)				
Business or Residence Addre No Friendent, Inc., 832 O					
Check Box(es) that Apply;	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, First Round Capital 2007	if individual) 7 LP				
Business or Residence Addre	·		•		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Lindsell, Logan	if individual)				
Business or Residence Addre 9850 South Maryland Pa	•		•		
Check Box(es) that Apply;	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Cohen, David	if individual)				
Business or Residence Addre 54 The Circle, Easton, C		Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)			· · · · · · · · · · · · · · · · · · ·	
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	Code)		
	(Use bla	nk sheet, or copy and use	additional copies of this s	heet, as necessary	)

					В. 1	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	issuer solo	i, or does th	ne issuer ir	itend to se	ll, to non-a	ccredited i	nvestors in	this offeri	ng?		Yes	No <b>⊠</b>
	Answer also in Appendix, Column 2, if filing under ULOE.										o la		
2.	What is	the minim	um investn	ent that w	ill be acce	pted from a	any individ	ual?				\$	n/a 
3.	Does th	e offering	permit join	t ownershi	p of a sing	le unit?	***************************************	******************		***************************************	***************************************	Yes 🗖	No <b>X</b>
4.	commis If a pers	sion or sim on to be lis s, list the na	ion request ilar remune ted is an ass ime of the b you may s	ration for s sociated pe roker or de	olicitation rson or age caler. If me	of purchase int of a brok ore than five	ers in conne cer or deale c (5) persor	ection with r registered as to be list	sales of sec i with the S ed are asso	curities in t EC and/or	he offering. with a state		
Ful	l Name (	Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, Z	Cip Code)						
Nai	me of Ass	sociated Br	oker or De	aler		-							
Sta	tes in W	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers		<u> </u>	<del></del>	· <del></del>		
	(Check	"All States	" or check	individual	States)	***************			***************************************	*************	• • • • • • • • • • • • • • • • • • • •	□ Al	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if ind	ividual)	, <u>.</u>	<del></del>	-	<del></del>					
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)					<del></del>	<u> </u>
Nai	me of Ass	sociated Br	oker or De	aler									· · · · · · · · · · · · · · · · · · ·
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						<del></del>
	(Check	"All States	or check	individual	States)		•••••			***************		All States	
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)		<u> </u>		<del> </del>		
Nar	ne of Ass	sociated Br	oker or De	aler								·	
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers	<del></del>					
	(Check	"All States	or check	individual	States)							☐ AI	l States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1,	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Date	175.000.00		s 175,000.00
	Debt			<b>4</b>
	Equity	·		\$
	Common Preserred			
	Convertible Securities (including warrants)		_	
	Partnership Interests			
	Other (Specify)			
	Total	175,000.00		<u>\$ 175,000.00</u>
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
		Number Investors		Dollar Amount of Purchases
	Accredited Investors	3	_	§ 175,000.00
	Non-accredited Investors		_	\$
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.		_	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505		_	\$
	Regulation A		_	\$
	Rule 504		_	\$
	Total		_	\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$
	Printing and Engraving Costs		_	\$
	Legal Fees	•	_   	\$ 1,000.00
	Accounting Fees	Y	<u>-</u>	\$
	Engineering Fees		_	\$
	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify) blue sky filing fees	•	<del>ار</del> ا	\$ 525.00
	Total		2	\$ 1,525.00
	1 Ut&1			D

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer."	Question 4.a. This difference is the "adjusted gros	SS	\$
5.	Indicate below the amount of the adjusted gross preeach of the purposes shown. If the amount for an check the box to the left of the estimate. The total o proceeds to the issuer set forth in response to Par	ry purpose is not known, furnish an estimate an I the payments listed must equal the adjusted gros	d	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🔲 \$	
	Purchase of real estate		. 🗆 \$	
	Purchase, rental or leasing and installation of mad and equipment		. 🗆 \$	_ [] \$
	Construction or leasing of plant buildings and fac		_	
	Acquisition of other businesses (including the val offering that may be used in exchange for the asso issuer pursuant to a merger)	ets or securities of another	. □ \$	s
	Repayment of indebtedness		_	_
	Working capital		_	
	Other (specify):			
			. 🗆 <b>\$</b>	
	Column Totals		s_0.00	173,475.00
	Total Payments Listed (column totals added)		<u></u> s <u>1</u>	73,475.00
		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Comm	ission, upon writte	
lss	uer (Print or Type)	Signature	Date	
Fr	endent, Inc.		Date //"/	00
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Sea	n Glass	Director		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE			
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No <b>X</b>	

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Friendent, Inc.		1/11/08
Name (Print or Type)	Title (Print or Type)	
Sean Glass	Director	_

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX				
l	Intend to non-a investors	to sell ecredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item I)		amount pu	investor and rchased in State C-Item 2)		under Sta (if yes, explana	ification te ULOE attach tion of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ		,							
AR									<u> </u>
CA									T
СО									
СТ			-		· · ·				
DE									
DC									
FL									
GA									
HI								,	
ID		:							
lL									
IN				-					
IA									
KS									
KY									
LA					<del></del>				
ME									
MD									
MA									
MI									
MN						<u> </u>			
MS			<del></del>	-					

		<del></del>			CINDIA					
1		2	3  Type of security		4				5 Disqualification under State ULOE	
	Intend	to sell	and aggregate					(if yes,		
1		ccredited	offering price		Type of	investor and		explana		
		s in State	offered in state		amount pur	rchased in State			granted)	
	(Part B	-Item 1)	(Part C-Item 1)		(Part	C-Item 2)		(Part E-	item I)	
				Number of		Number of				
State	Yes	No		Accredited Investors	Amount	Non-Accredited Investors	Amount	Yes	No	
State	1 63	110			Amount	1117031013		7		
МО										
MT							<u></u> .			
NE		<u></u>					<u> </u>		<u> </u>	
NV										
ИН										
NJ										
NM										
NY		×	Notes/\$112,500.00	2	\$112,500.00				×	
NC										
ND			<del></del>				-			
ОН									_ 1	
ОК				<del> </del>						
OR		ļ		_ <del></del>						
PA		×	Notes/\$62,500.00	1	\$62,500.00				×	
RI										
SC							<u></u>		ļ <u> </u>	
SD										
TN										
TX										
UT								<u></u>	<u></u>	
VT										
VA_			· · · · · · · · · · · · · · · · · · ·							
WA										
wv				<del> </del>		<del></del>				
WI								[		

APPENDIX

				APP	ENDIX				
1		2	3			5 Disqualification under State ULOE			
	to non-a	d to sell accredited is in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Rumber of Number of Non-Accredited				No
WY		:						,	
PR									

